Dept. of the Attorney General Tobacco Enforcement Unit 425 Queen Street Honolulu, Hawaii 96813

Print Name of Preparer

## STATE OF HAWAII Schedule of Cigarettes Sold in Hawaii Quarterly Report by Tobacco Product Manufacturers

Hawaii Revised Statutes, Chapter 486P\*

**Due Date:**This report is due no later than thirty days following each calendar quarter.

Trade Name (DBA/AKA)		Federal EIN Telephone Number		
Mailing Address of Principal Place of	of Business			
City and State	Country	Postal Code	E-Mail Address	
Contact Person	Title		Contact Telephone and Facsimile Number	

City and State			Country Postal Code		E-Mail Address			
Contact Person			Title			Contact Telephone <u>and</u> Facsimile Number		
		For G	Quarter Ending:			<del> </del>		
Invoice Invoice Date Number		Cigarettes shipped to: Name			Cigarettes shipp Address	ped to:	Cigarette Brand	No. of Cigarettes or oz. of "R/O"**
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*Haw. Rev. St	at., §486P-2:		***				, , , , , , , , , , , , , , , , , , ,	
	Requires that distributor, re (if any); (2) th during the pre that is a signar copies of repo	tailer or similar interne address of its prince to the prince calendar quare to the Master Sorts that the tobaccout is required to file a	It manufacturer selling cig mediary or intermediaries cipal place of business; (i ter into this State; and (4 ettlement Agreement, an product manufacturer su report pursuant to this ch napter shall be used only	<ul> <li>shall file a quart</li> <li>a memorandun</li> <li>other information</li> <li>d whose cigarette</li> <li>ibmits to the State</li> <li>napter shall also p</li> </ul>	erly report with the n or a copy of the in as may be require as are sold to cons no f Hawaii Departi rovide any informa	e Attorney General sett invoice covering each a ed by the Attorney Gen umers within this State ment of Taxation regar ation that the Attorney	ing forth: (1) its name and every shipment of eral. Any tobacco pro e, may file with the Att ding its sales activitie General may deem no	and trade name f cigarettes made oduct manufacturer corney General es in this State.
			s of "roll-your-own" tol after reasonable inquiry,				t are true, accurate, a	and complete.
Signature of Pr	reparer					Date		
g						naic		